ABSTRACT
PROFILE OF ANTI TUBERCULOSIS IN CHILDREN WITH AIDS AT INTERNAL DEPARTMENT (Study in Dr. Saiful Anwar Hospital Malang)

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Backgrounds: People with AIDS have an increased risk of developing various bacterial infection such as Mycobacterium tuberculosis. Children with AIDS have a better oppurtunity to TB relapse than children who are not with AIDS. The appropriate management of HIV-associated TB in children remains extremely challenging due to diagnostic difficulties, multidrug resistant, the overlapping side effect profiles of anti-TB and ARV, the complexity of drug-drug interactions and IRIS after initiation of ARV.

Objective: To analyze the profile of antituberculosis drugs used in tuberculosis infection with AIDS and to identify drug related problems (DRPs) of antituberculosis drug.

Method: It was a retrospective study during period January 2013 to December 2015 in children with AIDS ages 0 to 14 years receiving anti tuberculosis.

Result and Discussion: Dose antituberculosis in intensive phase is FDC (R 75 mg, H 50 mg, and Z 150 mg) (1 x 1, 2, 3 and 4 tabs) po, FDC (R 37 mg, H 37 mg, Z 111 mg) 1x¾ tab and FDC (R 90 mg, 60 mg H, Z 180 mg) 1x1,5 tab. Ethambutol dose is (1 x 110, 130, 200 and 400 mg) po. HES dose is H 1x145 mg, 1x360 mg E and S 1x300 mg IM. Doses intermediate phase is FDC (R 75 mg and H 50 mg. The problems that occur related to drugs is a side effect of H which causes numbness or tingling of hands and feet, RHZ cause hepatotoxicity and drug interactions of potential anti-tuberculosis (R) and the anti-retroviral (evavirenz, nevirapine, zidovudine).

Conclusion : Antituberculosis drugs use in children with AIDS were isoniazid, rifampicin, pyrazinamide, and ethambutol in combination. Route of administration of anti tuberculosis RHZE by oral and S by intramuscular. The dose in children were adjusted to the weight of patient.

Keywords: Anti tuberculosis, Children with HIV, Tuberculosis